Lessons From the Practice

The Right Question

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Mai, a 52-year-old Vietnamese woman, seemed more upset than usual. She had arrived in the United States just three years ago. Her parents and much of her family had been killed during the war, but a brother had made it to San Jose, California, in the late 1970s. He had sponsored Mai's immigration, and she had moved in with him and his family. Her medical problems included diabetes mellitus, chronic renal failure, painful neuropathy, hypertension, and degenerative arthritis. She had been my patient for two years; most of her visits to the clinic were frustrating for both of us.

For many months I listened attentively as she complained to me through Duc, our Vietnamese interpreter. Many of her symptoms persisted: chronic headaches, insomnia, dizziness, and back pain. I compulsively did workups for her symptoms, but the longer they persisted and the more tests I ordered, the less I uncovered. No matter which antihypertensive or antidepressant drug I prescribed, no matter what therapist or social agency I referred her to, no matter how compassionate I tried to be, it seemed that I accomplished little. There was never a smile or a "thank you," just tight-lipped grimaces.

Today she shook her head and aimed torrents of high-pitched, squeaky Vietnamese at Duc. Some months before, Mai had had her hair cut short, crew-cut style, in an effort to cure the headaches. She wore a black duck-billed hunter's cap with ear protectors over her gray-speckled hair. Her dark little eyes had a pained look. Her stubby hands and fingers clenched and unclenched the corners of the examination table and left sweat stains on the paper covering. I noticed that her fingernails were bitten to the quick.

"Doctor," Duc began after Mai paused a moment, "she says her chest hurts all the time, with her headaches. And she cannot sleep." He told me this in an indifferent tone, accustomed as he was to hearing these complaints over and over in the clinic.

With an unblinking calm that belied my inner frustration, I said, "Mai, I am concerned about these problems. Also, your blood pressure and blood sugar are too high. That's part of why you feel so sick. I tried you on a pill to take at bedtime for sleep and depression. Did it help?"

Duc translated. Mai let out another burst of anguished speech. "She said the medicine you gave her last visit made her dizzy all day, so she stopped all of her pills."

"You know, Mai," I said with rising exasperation, "you've been coming to see me for two years, but not much has changed. Your symptoms are the same, and now you have stopped the medications for blood pressure and diabetes. How can I help you?"

Duc looked at me sideways and knitted his brow skeptically. He spoke briefly to Mai. "She says only please give her medications for dizziness and headaches and sleeping." My spirits sank visibly. "Mai," I said, "you are very unhappy. What in your life have you ever enjoyed doing, even if you cannot do it now?" The standard inquiries hadn't worked with Mai; I wanted at least to get us out of the muddy rut that had become our relationship.

Once again, Duc gave me a sideways glance and asked Mai the question. Suddenly the forlorn, anxious look vanished, and a smile tugged at the corners of her mouth as she replied.

"She used to paint pictures, but her brother did not like the mess in the garage. Her things are now packed up in boxes, and she cannot paint anymore."

"Painting?" I asked with disbelief. "Like with oils and watercolors?"

"That is what she said. Back in Vietnam, she would stand close by the delta or a river and paint the workers in the rice fields or the soldiers or the helicopters that flew by."

I was incredulous. I could scarcely imagine what her life must have been like 30 years before, what spirit and energy it had taken for a young woman to create art while all around her a war destroyed her family and her country. Suddenly she became a complicated and multidimensional person to me, no longer a non–English-speaking patient whose medical and psychological problems defied all my efforts.

"Well Mai, I want you to get out your brushes and paints. One hour each day. Tell your brother those are 'doctor's orders.' No extra pills. Just take the ones I've been giving you. Don't miss even one day."

One month later she was back. She still wore the ill-fitting cap and looked chronically ill. But her nails had grown out, and her short fingers appeared childlike and delicate. I took her blood pressure and exhaled a sigh of relief. And the finger-stick glucose wasn't normal, but at least it wasn't 400 mg per dl.

Mai spoke quietly to Duc, who then turned to me and said, this time with a conspiratorial smile, "She says 'thank you,' she is much better."

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"Well, even though you are on the same pills, your sugar and blood pressure are much improved," I said.

"Mai told me that if her legs or head hurt too badly, she rests and takes a pain pill, then it is better."

Mai pulled a painting from a grocery bag and handed it to me. She spoke to Duc with embarrassed smiles and chuckles.

"She wants you to have this picture, Doctor. She painted it after she saw you last. It is from a photograph she kept from Vietnam, one taken near where she grew up."

I held the 24-in by 12-in watercolor at arm's length. It was a jungle scene, a small lake surrounded by palm trees and brush. Mai had used deep blues, greens, and silver to capture the water, its surface pleated by a breeze; palm fronds seemed to toss back and forth on the trees that rimmed the lake; a thatched hut, partially hidden and shaded by bushes, occupied a corner of the background. The striking feature of the painting, however, was two egrets in the foreground. They stood at the water's edge, along a sandy bank. One was busily nosing the shallow water and sand, kicking up droplets and spray. The other one, neck arched gracefully, gazed at its partner; it wore the brightly colored ornamental plumes of the mating season. Taken together, the birds evoked the spirit of hope and the potential of love.

"I am very grateful," I responded awkwardly, moved almost beyond words. "I will keep this special gift at home, in my office." Duc translated. After I handed her her prescriptions, Mai left.

Quite by accident I had asked the right question. On the surface, it had no medical relevance, yet it had been the key to managing this patient's blood pressure and diabetes. The fact that she had been able to share a secret part of her life with me inspired her to finally comply with my treatment. And almost by magic, she and I had discovered how to manage her anxiety and somatic symptoms. Mai did much more than give me a painting; in the process, she had drawn a self-portrait, a portrait of a woman I'd been acquainted with for two years, but had never really known.

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"Lessons From the Practice" presents a personal experience of practicing physicians, residents, and medical students that made a lasting impression on the author. These pieces will speak to the art of medicine and to the primary goals of medical practice—to heal and to care for others. Physicians interested in contributing to the series are encouraged to submit their "lessons" to the series' editors.

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